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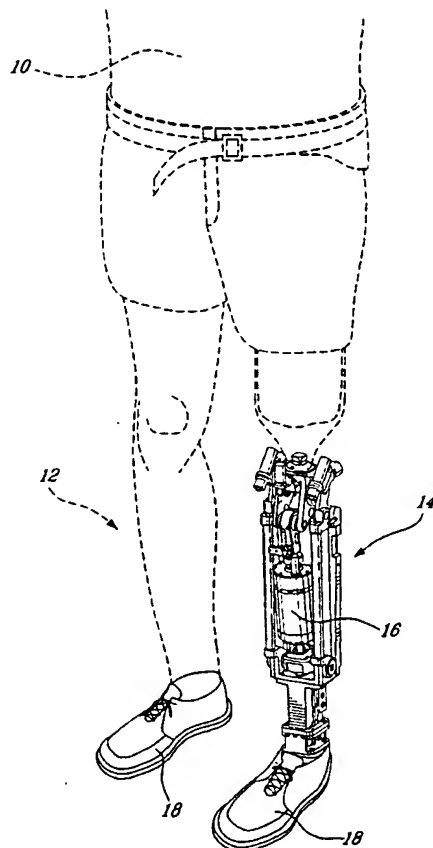
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- (71) Applicant: **VICTHOM HUMAN BIONICS INC.**
[CA/CA]; 4780, rue Saint-Félix, Bureau 105, Saint-Augustin-de-Desmaures, Québec G3A 2J9 (CA).
- (72) Inventor: **BÉDARD, Stéphane**; 256, rue du Tonnelier, Saint-Augustin-de-Desmaures, Québec G3A 2K5 (CA).
- (74) Agents: **PELLEMANS, Nicolas et al.**; McCarthy Tétrauli LLP, Le Windsor, 1170 Peel Street, Montréal, Québec H3B 4S8 (CA).
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[Continued on next page]

(54) Title: POSITIONING OF LOWER EXTREMITIES ARTIFICIAL PROPRIOCEPTORS



(57) Abstract: The method is used for controlling an actuating mechanism (16) of a prosthesis (14) provided on one side of the lower body of an individual (10), the individual (10) having a healthy leg (12) on the other side. Accordingly, the method comprises providing a plurality of artificial proprioceptors (20), at least one of the artificial proprioceptors (20) being on the side of the healthy leg (12), and at least one of the artificial proprioceptors (20) being on provided with the prosthesis (14), generating data signals in real time at the artificial proprioceptors (20), and generating control signals in real time for controlling the actuating mechanism (16) in response to the data signals.

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POSITIONING OF LOWER EXTREMITIES ARTIFICIAL PROPRIOCEPTORS

The present invention relates to the positioning of lower extremities artificial proprioceptors for use with a control system and/or a method for controlling an actuated prosthesis. This invention is particularly well adapted for controlling an actuated leg prosthesis for above-knee amputees.

As is well known to control engineers, the automation of complex mechanical systems is not something easy to achieve. Among such systems, conventional powered artificial limbs are notorious for having control problems. These conventional prostheses are equipped with basic controllers that artificially mobilize the joints without any interaction from the amputee and are only capable of generating basic motions. Such basic controllers do not take into consideration the dynamic conditions of the working environment, regardless the fact that the prosthesis is required to generate appropriate control within a practical application. They are generally lacking in predictive control strategies necessary to anticipate the artificial limb's response as well as lacking in adaptive regulation enabling the adjustment of the control parameters to the dynamics of the prosthesis. Because human limb mobility is a complex process including voluntary, reflex and random events at the same time, conventional prostheses do not have the capability to interact simultaneously with the human body and the external environment in order to have minimal appropriate functioning.

Considering this background, it clearly appears that there was a need to provide the capability to interact simultaneously with the human body and the external environment to a control systems and/or methods for controlling a dynamic prosthesis in order to fulfill the needs of amputees, in particular those of above-knee amputees.

In accordance with one aspect of the present invention, there is provided a method of controlling an actuating mechanism of a prosthesis provided on one side of the lower body of an individual, the individual having a healthy leg on the other side, the method being characterized in that it comprises:

providing a plurality of artificial proprioceptors, at least one of the artificial proprioceptors being on the side of the healthy leg, and at least one of the artificial proprioceptors being on provided with the prosthesis;

generating data signals in real time at the artificial proprioceptors; and

- 5 generating control signals in real time for controlling the actuating mechanism in response to the data signals.

In accordance with another aspect of the present invention, there is provided a device for controlling an actuating mechanism of a prosthesis provided on one side of the lower body of an individual, the individual having a healthy leg on the other side, the
10 device being characterized in that it comprises:

a plurality of artificial proprioceptors, at least one of the artificial proprioceptors being on the side of the healthy leg, and at least one of the artificial proprioceptors being on the side of the prosthesis;

means for generating data signals in real time at the artificial proprioceptors; and

- 15 means for generating control signals in real time for controlling the actuating mechanism in response to the data signals.

In accordance with a further aspect of the present invention, there is provided a lower extremities prosthesis provided on one side of the lower body of an individual, the individual having a healthy leg on the other side, the prosthesis being characterized in
20 that it comprises:

a plurality of artificial proprioceptors, at least one of the artificial proprioceptors being on the side of the healthy leg, and at least one of the artificial proprioceptors being on provided with the prosthesis;

means for generating data signals in real time at the artificial proprioceptors;

- 25 at least one actuating mechanism; and

means for generating control signals in real time for controlling the actuating mechanism in response to the data signals.

These and other aspects of the present invention are described in or apparent from the following detailed description, which description is made in conjunction with the
5 accompanying figures.

FIG. 1 shows the lower body of an individual provided with a prosthesis on one side and having a healthy leg on the other side.

FIG. 2 is a block diagram showing a control system for a prosthesis having an actuating mechanism.

10 FIG. 3 is an upper schematic view of an insole provided with plantar pressure sensors.

FIG. 4 is a cross sectional view of a sensor shown in FIG. 3.

FIGS. 5a to 5d are examples of four data signals using plantar pressure sensors during typical walking on flat ground.

15 FIGS. 6a to 6d give an example of a data signal obtained from a plantar pressure sensor at the calcaneus region and its first three differentials.

FIGS. 7a to 7d give an example of a data signal obtained from a plantar pressure sensor at the metatarsophalangeal (MP) region and its first three differentials.

20 FIGS. 8a to 8d give an example of the zero crossings for a typical localized plantar pressure signal, and its first three differentials, at the calcaneous region conditions.

FIGS. 9a to 9c give an example of the zero crossings for a typical localized
25 plantar pressure signal, and its first three differentials, at the metatarsophalangeal (MP) region.

The appended figures show positioning of lower extremities artificial proprioceptors (20) for use with a control system (100) and a method for controlling a prosthesis (14) having an actuating mechanism (16) in accordance with the preferred embodiment of the present invention. It should be understood that the present invention is not limited to the illustrated implementation since various changes and modifications may be effected herein without departing from the scope of the appended claims.

FIG. 1 shows a prosthesis (14) provided on one side of the lower body of an individual (10), the individual (10) having a healthy leg (12) on the other side. Artificial proprioceptors (20) are provided both on the healthy leg (12) and on the prosthesis (14). The prosthesis (14) comprises an actuating mechanism (16) which may be either passive or active. A passive actuating mechanism may be generally defined as an electro-mechanical component that only absorbs mechanical energy in order to modify dynamics of mechanical joints of the prosthesis, while an active actuating mechanism may be generally defined as an electro-mechanical component that absorbs and supplies mechanical energy in order to modify dynamics of mechanical joints of the prosthesis.

An example of a passive actuating mechanism is described in U.S. patent application No. 09/767,367, filed January 22, 2001, entitled "ELECTRONICALLY CONTROLLED PROSTHETIC KNEE". Examples of active actuating mechanisms are described in U.S. patent application No. _____ filed June 17, 2003, entitled "ACTUATED PROSTHESIS FOR ABOVE-KNEE AMPUTEES", by Stéphane Bédard et al.

FIG. 2 shows the control system (100) being combined with artificial proprioceptors (20) and a prosthesis (14) having an actuating mechanism (16), such as shown in FIG. 1. The purpose of the control system (100) is to provide the required signals allowing to control the actuating mechanism (16). To do so, the control system (100) is interfaced with the amputee (10) using the artificial proprioceptors (20) to ensure proper coordination between the amputee (10) and the movements of the prosthesis (14). The set of artificial proprioceptors (20) captures information, in real time, about the dynamics of the amputee's movement and provide that information to the control system (100). The control system (100) is then used to determine the resistance to

be applied to a joint, in the case of a passive actuating mechanism, or the joint trajectories and the required force or torque that must be applied by a joint, in the case of an active actuating mechanism, in order to provide coordinated movements.

It should be noted that the present invention is not limited to its use with the mechanical configuration illustrated in FIG. 1. The control system (100) may be used with a leg prosthesis having more than one joint. For instance, it may be used with a prosthesis having an ankle joint, a metatarsophalangeal joint or a hip joint in addition to a knee joint. Moreover, instead of a conventional socket a osseo-integrated devices could also be used, ensuring a direct attachment between the mechanical component of the prosthesis and the amputee skeleton. Other kinds of prostheses may be used as well.

The control system (100) shown in FIG. 2 comprises an interface (30) through which data signals coming from the artificial proprioceptors (20) are received. They may be received either from an appropriate wiring or from a wireless transmission. The data signals from the artificial proprioceptors (20) provided on a healthy leg (12) are advantageously sent through the wireless transmission using an appropriate radio frequency (RF) module. Of course, other combinations of communication link technologies may be used, such as wired, wireless, optical, etc.

Software residing on a controller (40) contains all the algorithms enabling the control system (100) to provide the required signals allowing to control the actuating mechanism (16).

The artificial proprioceptors (20), located on both the healthy leg (12) and the prosthesis (14), may include myoelectric sensors, neuro-sensors, kinematic sensors, kinetic sensors or plantar pressure sensors. Myoelectric sensors are electrodes used to measure the internal or the external myoelectrical activity of skeletal muscles. Neuro-sensors are electrodes used to measure the summation of one or more action potentials of peripheral nerves. Kinematic sensors are used to measure the position of articulated joints, the mobility speed or acceleration of lower extremities. Kinetic sensors are used to measure rotational forces at the articulated joints or reaction forces of lower extremities. Plantar pressure sensors are used to measure the

vertical plantar pressure of a specific underfoot area. Of course, additional types of sensors which provide information about various dynamics of human locomotion may be used. For a given application, the use of artificial proprioceptors (20) is not restricted to a specific type of sensor, multiple types of sensors in various combinations may be used.

The controller (40) ensures, in real-time, the decomposition of the locomotion of an individual (10) based on the information provided by the artificial proprioceptors (20). In accordance with the present invention, it was found that data signals received from individual artificial proprioceptors (20) located on both the healthy leg (12) and the prosthesis (14) of an individual (10) can provide enough information in order to control the actuating mechanism (16) of the prosthesis (14). For instance, in the case of plantar pressure sensors, it has been noticed experimentally that the slope (first derivative), the sign of the concavity (second derivative) and the slope of concavity (third derivative) of the data signals received from plantar pressure sensors, and of combinations of those signals, give highly accurate and stable information on the human locomotion and enable the decomposition of the human locomotion into a finite number of portions. This breakdown ensures the proper identification of the complete mobility dynamics of the lower extremities in order to model the human locomotion. Of course, the use of plantar pressure sensors is given as an example and does not limit the definition of artificial proprioceptors to such sensors.

EXAMPLE

In a sample application, the artificial proprioceptors (20) may comprise localized plantar pressure sensors, which measure the vertical plantar pressure of a specific underfoot area, combined with a pair of gyroscopes which measure the angular speed of body segments of the lower extremities and a kinematic sensor which measures the angle of the prosthesis (14) knee joint. The plantar pressure sensors are used under both feet, the foot of the healthy leg (12) as well as the foot of the prosthesis (14). One of the gyroscopes is located at the shank of the healthy leg (12) while the other is located on the upper portion of the prosthesis (14) above the knee joint, i.e. at the residual thigh. As for the kinematic sensor, it is located at the prosthesis (14)

knee joint. Of course, the use of plantar pressure sensors, gyroscopes and kinematic sensors is given as an example and does not limit the definition of artificial proprioceptors to such sensors.

In FIG. 4, the plantar pressure sensors (20) are provided in a custom-made insole (18), preferably in the form of a standard orthopedic insole, that is modified to embed the two sensors (20) for the measurement of two localized plantar pressures. Each sensor (20), as shown in FIG. 5, is preferably composed of a thin Force-Sensing Resistor (FSR) polymer cell (22) directly connected to the interface (30) or indirectly using an intermediary system (not shown), for instance a wireless emitter. The FSR cell (22) has a decreasing electrical resistance in response to an increasing force applied perpendicularly to the surface thereof. Each cell (22) outputs a time variable electrical signal for which the intensity is proportional to the total vertical plantar pressure over its surface area. The size and position of the plantar pressure sensors (20) were defined in accordance with the stability and the richness (intensity) of the localized plantar pressure signals provided by certain underfoot areas during locomotion.

Experimentation provided numerous data concerning the spatial distribution of foot pressures and more specifically on the Plantar Pressure Maximal Variation (PPMV) during locomotion. The PPMV was defined as the maximum variation of the plantar pressure at a particular point (underfoot area of coordinate i,j) during locomotion. The X-Y axis (19) in FIG. 3 was used to determine the i,j coordinates of each underfoot area. It was found by experimentation that the calcaneus and the Metatarsophalangeal (MP) regions are two regions of the foot sole where the PPMV may be considered as providing a signal that is both stable and rich in information.

The normalized position of the pressure sensors and their size are shown in Table 1, where the length L and the width W are respectively the length and the width of the subject's foot. The coefficients in Table 1 have been obtained by experimentation. A typical diameter for the plantar pressure sensors (20) is between 20 and 30 mm.

Table 1 - Normalized position and size of plantar pressure sensors

Area	Position (X, Y)	Size (diameter)
Calcaneus	$(0.51 \cdot W, 0.14 \cdot L)$	$0.29 \cdot \sqrt{L \cdot W}$
MP	$(0.47 \cdot W, 0.76 \cdot L)$	$0.24 \cdot \sqrt{L \cdot W}$

FIGS. 5a to 5d show examples of data signals from the four localized plantar pressure sensors (20) during a standard walking path at 109,5 steps/minute. The four signals, $f_{r1}(t)$, $f_{r2}(t)$, $f_{r3}(t)$ and $f_{r4}(t)$, correspond to the variation in time of the localized plantar pressure at the calcaneus region of the left foot (FIG. 5a), the MP region of the left foot (FIG. 5b), the calcaneus region of the right foot (FIG. 5c), and the MP region of the right foot (FIG. 5d).

FIGS. 6a to 6d and 7a to 7d show examples of graphs of localized plantar pressures, as well as their first, second and third differentials, at the calcaneus and MP regions respectively, for a linear walking path of 109,5 steps/minute.

FIGS. 8a to 8d show graphically the zero crossings for a typical localized plantar pressure signal, and its first three differentials, at the calcaneus region conditions, which may be used by the controller (40) to decompose the locomotion of the individual (10), while FIGS. 9a to 9c do so for the localized plantar pressure signal, and its first two differentials, at the MP region. This shows the relationships between the various data and derivative signals.

Accordingly, the controller (40) may use the four localized plantar pressure signals, the first, the second and the third differentials of each of those four localized plantar pressure signals, as well as the information gathered from the data signals of the two gyroscopes and the kinematic sensor, in order to decompose the locomotion of the individual (10) into a finite number of portions, and generate the controls signals for controlling the actuating mechanism (16) in response to the data signals. Of course, the controller (40) is not limited to the use of the preceding data and derived signals.

A controller (40) and control system (100) using artificial proprioceptors comprising plantar pressure sensors as well as gyroscopes and a kinematic sensor is described

in U.S. patent application No. _____ filed June 20, 2003, which is entitled "CONTROL SYSTEM AND METHOD FOR CONTROLLING AN ACTUATED PROSTHESIS", by Stéphane Bédard.

CLAIMS:

1. A method of controlling an actuating mechanism (16) of a prosthesis (14) provided on one side of the lower body of an individual (10), the individual (10) having a healthy leg (12) on the other side, the method being characterized in that it comprises:

providing a plurality of artificial proprioceptors (20), at least one of the artificial proprioceptors (20) being on the side of the healthy leg (12), and at least one of the artificial proprioceptors (20) being on provided with the prosthesis (14);

generating data signals in real time at the artificial proprioceptors (20); and

generating control signals in real time for controlling the actuating mechanism (16) in response to the data signals.
2. A method according to claim 1, characterized in that at least one of the data signals is supplied via a wired connection.
3. A method according to claim 1, characterized in that at least one of the data signals is supplied via a wireless connection.
4. A method according to claim 1, characterized in that the actuating mechanism (16) is a passive electro-mechanical component that absorbs mechanical energy in order to modify dynamics of mechanical joints of the prosthesis (14).
5. A method according to claim 1, characterized in that the actuating mechanism (16) is an active electro-mechanical component that absorbs

and supplies mechanical energy in order to modify dynamics of mechanical joints of the prosthesis (14).

6. A method according to claim 1, characterized in that the artificial proprioceptors (20) include myoelectric sensors.
7. A method according to claim 6, characterized in that the myoelectric sensors include external electrodes to measure myoelectric activity of skeletal muscles of the individual (10).
8. A method according to claim 6, characterized in that the myoelectric sensors include internal electrodes to measure myoelectric activity of skeletal muscles of the individual (10).
9. A method according to claim 1, characterized in that the artificial proprioceptors (20) include neuro-sensors.
10. A method according to claim 9, characterized in that the neuro-sensors are electrodes to measure the summation of one or more action potentials of peripheral nerves of the individual (10).
11. A method according to claim 1, characterized in that the artificial proprioceptors (20) include kinematic sensors.
12. A method according to claim 11, characterized in that the kinematic sensors include means for measuring the position of articulated joints of lower extremities parts of the individual (10).

13. A method according to claim 11, characterized in that the kinematic sensors include means for measuring the mobility speed of lower extremities parts of the individual (10).
14. A method according to claim 11, characterized in that the kinematic sensors include means for measuring the mobility acceleration of lower extremities parts of the individual (10).
15. A method according to claim 11, characterized in that at least one of the kinematic sensors is located at the shank of the healthy leg (12) of the individual (10).
16. A method according to claim 11, characterized in that at least one of the kinematic sensors is located at a socket of the prosthesis (14).
17. A method according to claim 1, characterized in that the artificial proprioceptors (20) include kinetic sensors.
18. A method according to claim 17, characterized in that the kinetic sensors include means for measuring rotational forces at articulated joints of lower extremities parts of the individual (10):
19. A method according to claim 17, characterized in that the kinetic sensors include means for measuring reaction forces at lower extremities parts of the individual (10).
20. A method according to claim 17, characterized in that at least one of the kinetic sensors is located at a transtibial post of the prosthesis (14).

21. A method according to claim 1, characterized in that the artificial proprioceptors (20) include plantar pressure sensors.
22. A method according to claim 21, characterized in that the plantar pressure sensors include force-sensing resistors measuring the pressure forces at underfoot areas into at least one human body plan.
23. A method according to claim 21, characterized in that at least one of the plantar pressure sensors is located at a metatarsophalangeal region of a foot of the healthy leg (12) and at least one of the plantar pressure sensors is located at a calcaneus region of the foot of the healthy leg (12).
24. A method according to claim 21, characterized in that at least one of the plantar pressure sensors is located at a metatarsophalangeal region of a prosthetic foot of the prosthesis (14) and at least one of the plantar pressure sensors is located at a calcaneus region of the prosthetic foot of the prosthesis (14).
25. A device for controlling an actuating mechanism (16) of a prosthesis (14) provided on one side of the lower body of an individual (10), the individual (10) having a healthy leg (12) on the other side, the device being characterized in that it comprises:
 - a plurality of artificial proprioceptors (20), at least one of the artificial proprioceptors (20) being on the side of the healthy leg (12), and at least one of the artificial proprioceptors (20) being on the side of the prosthesis (14);
 - means for generating data signals in real time at the artificial proprioceptors (20); and

means for generating control signals in real time for controlling the actuating mechanism (16) in response to the data signals.

26. A device according to claim 25, characterized in that at least one of the data signals is supplied via a wired connection.
27. A device according to claim 25, characterized in that at least one of the data signals is supplied via a wireless connection.
28. A device according to claim 25, characterized in that the actuating mechanism (16) is a passive electro-mechanical component that absorbs mechanical energy in order to modify dynamics of mechanical joints of the prosthesis (14).
29. A device according to claim 25, characterized in that the actuating mechanism (16) is an active electro-mechanical component that absorbs and supplies mechanical energy in order to modify dynamics of mechanical joints of the prosthesis (14).
30. A device according to claim 25, characterized in that the artificial proprioceptors (20) include myoelectric sensors.
31. A device according to claim 30, characterized in that the myoelectric sensors include external electrodes to measure myoelectric activity of skeletal muscles of the individual (10).
32. A device according to claim 30, characterized in that the myoelectric sensors include internal electrodes to measure myoelectric activity of skeletal muscles of the individual (10).

33. A device according to claim 25, characterized in that the artificial proprioceptors (20) include neuro-sensors.
34. A device according to claim 33, characterized in that the neuro-sensors are electrodes to measure the summation of one or more action potentials of peripheral nerves of the individual (10).
35. A device according to claim 25, characterized in that the artificial proprioceptors (20) include kinematic sensors.
36. A device according to claim 35, characterized in that the kinematic sensors include means for measuring the position of articulated joints of lower extremities parts of the individual (10).
37. A device according to claim 35, characterized in that the kinematic sensors include means for measuring the mobility speed of lower extremities parts of the individual (10).
38. A device according to claim 35, characterized in that the kinematic sensors include means for measuring the mobility acceleration of lower extremities parts of the individual (10).
39. A device according to claim 35, characterized in that at least one of the kinematic sensors is located at the shank of the healthy leg (12) of the individual (10).
40. A device according to claim 35, characterized in that at least one of the kinematic sensors is located at a socket of the prosthesis (14).

41. A device according to claim 25, characterized in that the artificial proprioceptors (20) include kinetic sensors.
42. A device according to claim 41, characterized in that the kinetic sensors include means for measuring rotational forces at articulated joints of lower extremities parts of the individual (10).
43. A device according to claim 41, characterized in that the kinetic sensors include means for measuring reaction forces at lower extremities parts of the individual (10).
44. A device according to claim 41, characterized in that at least one of the kinetic sensors is located at a transtibial post of the prosthesis (14).
45. A device according to claim 25, characterized in that the artificial proprioceptors (20) include plantar pressure sensors.
46. A device according to claim 45, characterized in that the plantar pressure sensors include force-sensing resistors measuring the pressure forces at underfoot areas into at least one human body plan.
47. A device according to claim 45, characterized in that at least one of the plantar pressure sensors is located at a metatarsophalangeal region of a foot of the healthy leg (12) and at least one of the plantar pressure sensors is located at a calcaneus region of the foot of the healthy leg (12).
48. A device according to claim 45, characterized in that at least one of the plantar pressure sensors is located at a metatarsophalangeal region of a prosthetic foot of the prosthesis (14) and at least one of the plantar pressure

sensors is located at a calcaneus region of the prosthetic foot of the prosthesis (14).

49. A lower extremities prosthesis (14) provided on one side of the lower body of an individual (10), the individual (10) having a healthy leg (12) on the other side, the prosthesis (14) being characterized in that it comprises:

a plurality of artificial proprioceptors (20), at least one of the artificial proprioceptors (20) being on the side of the healthy leg (12), and at least one of the artificial proprioceptors (20) being on provided with the prosthesis (14);

means for generating data signals in real time at the artificial proprioceptors (20);

at least one actuating mechanism (16); and

means for generating control signals in real time for controlling the actuating mechanism (16) in response to the data signals.

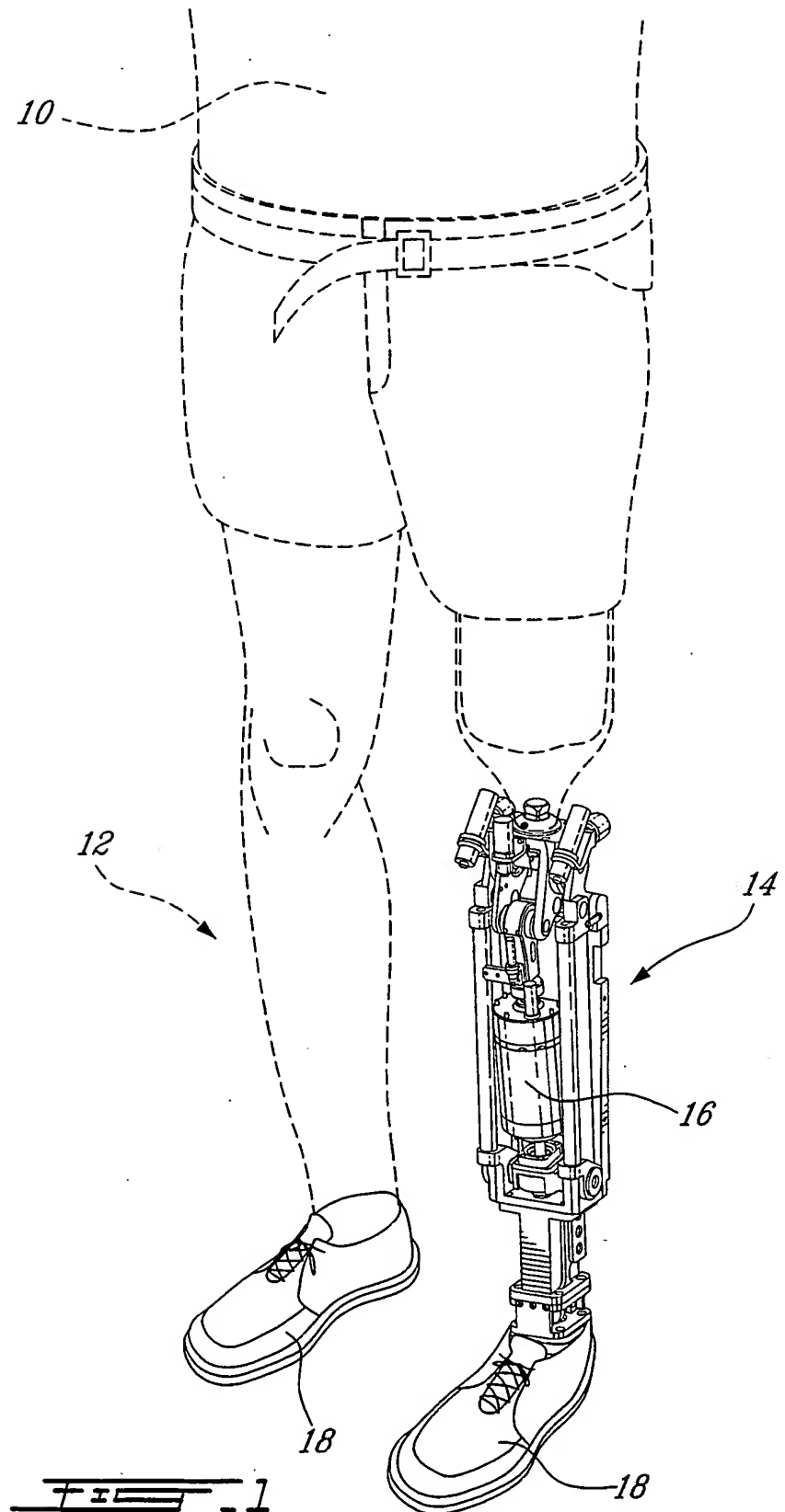
50. A prosthesis (14) according to claim 49, characterized in that at least one of the data signals is supplied via a wired connection.
51. A prosthesis (14) according to claim 49, characterized in that at least one of the data signals is supplied via a wireless connection.
52. A prosthesis (14) according to claim 49, characterized in that the actuating mechanism (16) is a passive electro-mechanical component that absorbs mechanical energy in order to modify dynamics of mechanical joints of the prosthesis (14).

53. A prosthesis (14) according to claim 49, characterized in that the actuating mechanism (16) is an active electro-mechanical component that absorbs and supplies mechanical energy in order to modify dynamics of mechanical joints of the prosthesis (14).
54. A prosthesis (14) according to claim 49, characterized in that the artificial proprioceptors (20) include myoelectric sensors.
55. A prosthesis (14) according to claim 54, characterized in that the myoelectric sensors include external electrodes to measure myoelectric activity of skeletal muscles of the individual (10).
56. A prosthesis (14) according to claim 54, characterized in that the myoelectric sensors include internal electrodes to measure myoelectric activity of skeletal muscles of the individual (10).
57. A prosthesis (14) according to claim 49, characterized in that the artificial proprioceptors (20) include neuro-sensors.
58. A prosthesis (14) according to claim 57, characterized in that the neuro-sensors are electrodes to measure the summation of one or more action potentials of peripheral nerves of the individual (10).
59. A prosthesis (14) according to claim 49, characterized in that the artificial proprioceptors (20) include kinematic sensors.
60. A prosthesis (14) according to claim 59, characterized in that the kinematic sensors include means for measuring the position of articulated joints of lower extremities parts of the individual (10).

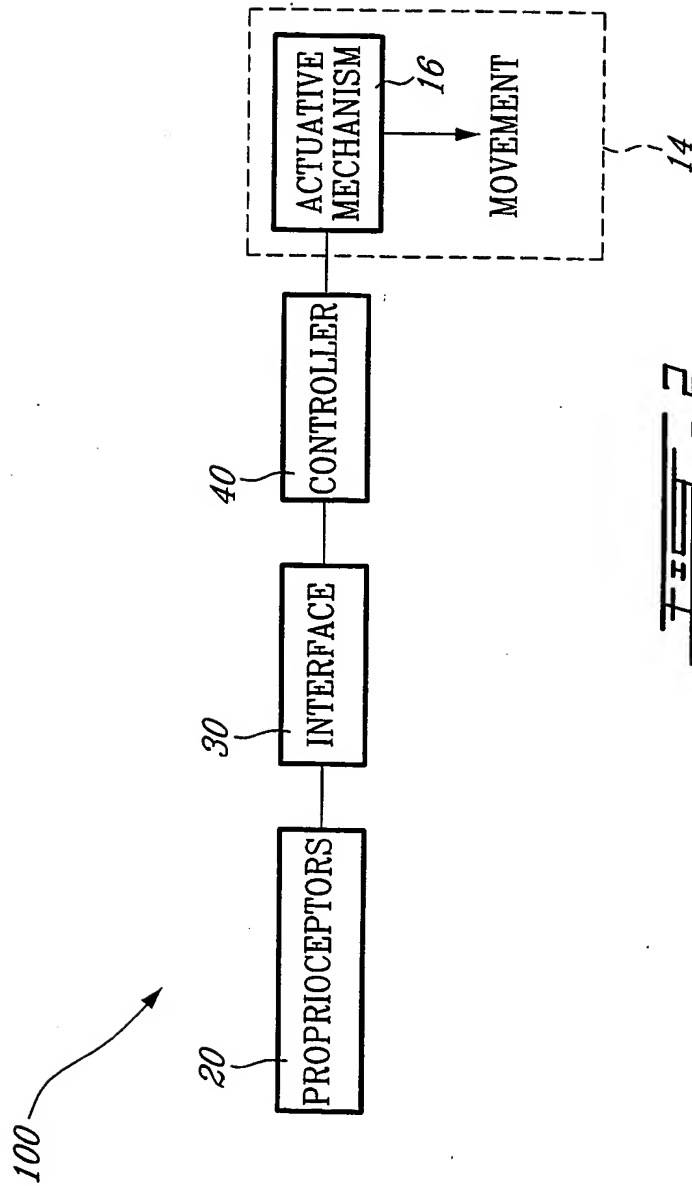
61. A prosthesis (14) according to claim 59, characterized in that the kinematic sensors include means for measuring the mobility speed of lower extremities parts of the individual (10).
62. A prosthesis (14) according to claim 59, characterized in that the kinematic sensors include means for measuring the mobility acceleration of lower extremities parts of the individual (10).
63. A prosthesis (14) according to claim 59, characterized in that at least one of the kinematic sensors is located at the shank of the healthy leg (12) of the individual (10).
64. A prosthesis (14) according to claim 59, characterized in that at least one of the kinematic sensors is located at a socket of the prosthesis (14).
65. A prosthesis (14) according to claim 49, characterized in that the artificial proprioceptors (20) include kinetic sensors.
66. A prosthesis (14) according to claim 65, characterized in that the kinetic sensors include means for measuring rotational forces at articulated joints of lower extremities parts of the individual (10).
67. A prosthesis (14) according to claim 65, characterized in that the kinetic sensors include means for measuring reaction forces at lower extremities parts of the individual (10).
68. A prosthesis (14) according to claim 65, characterized in that at least one of the kinetic sensors is located at a transtibial post of the prosthesis (14).

69. A prosthesis (14) according to claim 49, characterized in that the artificial proprioceptors (20) include plantar pressure sensors.
70. A prosthesis (14) according to claim 69, characterized in that the plantar pressure sensors include force-sensing resistors measuring the pressure forces at underfoot areas into at least one human body plan.
71. A prosthesis (14) according to claim 69, characterized in that at least one of the plantar pressure sensors is located at a metatarsophalangeal region of a foot of the healthy leg (12) and at least one of the plantar pressure sensors is located at a calcaneus region of the foot of the healthy leg (12).
72. A prosthesis (14) according to claim 69, characterized in that at least one of the plantar pressure sensors is located at a metatarsophalangeal region of a prosthetic foot of the prosthesis (14) and at least one of the plantar pressure sensors is located at a calcaneus region of the prosthetic foot of the prosthesis (14).

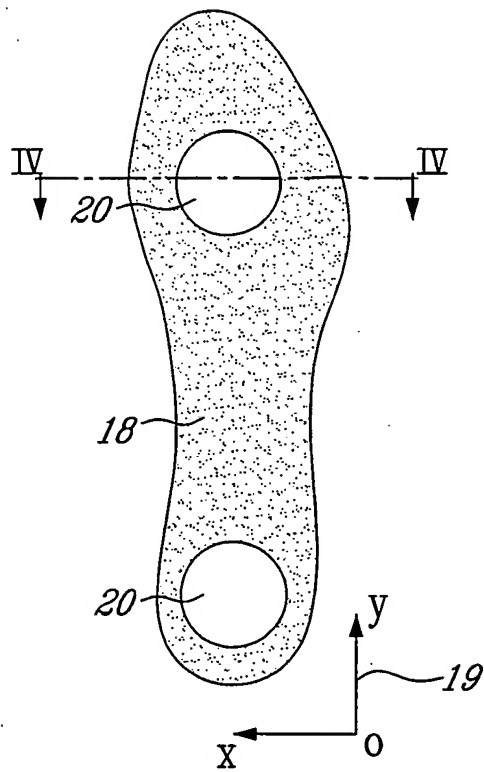
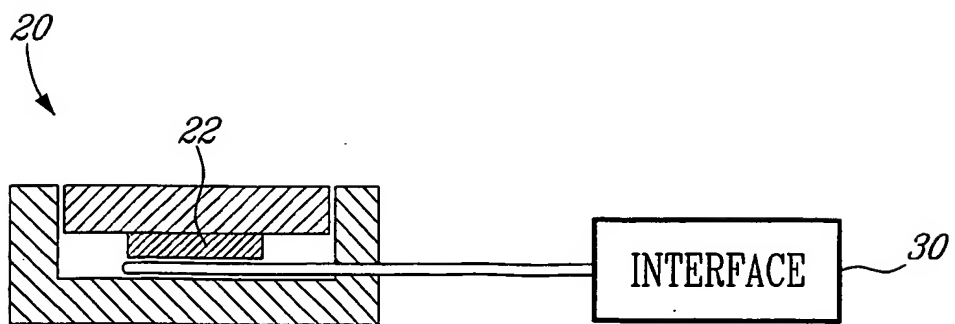
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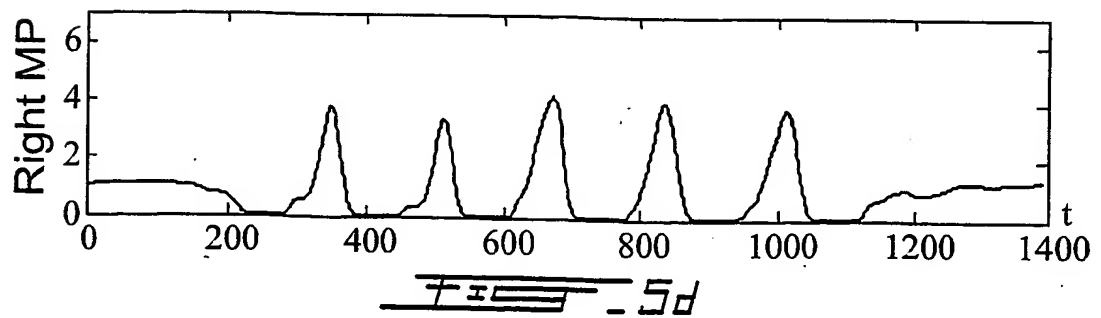
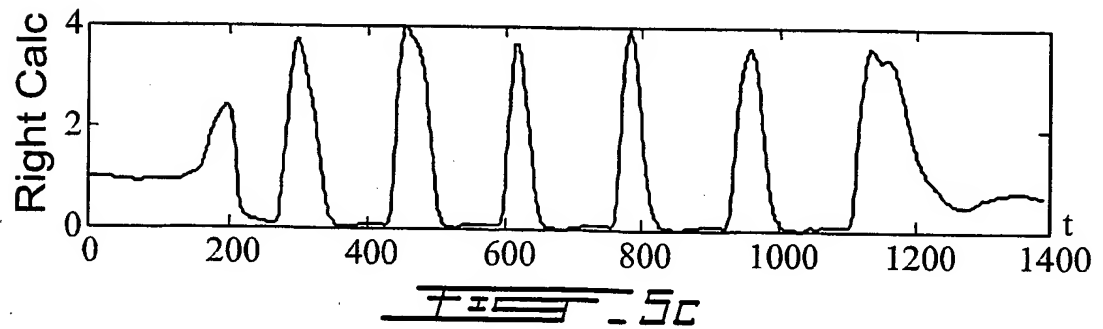
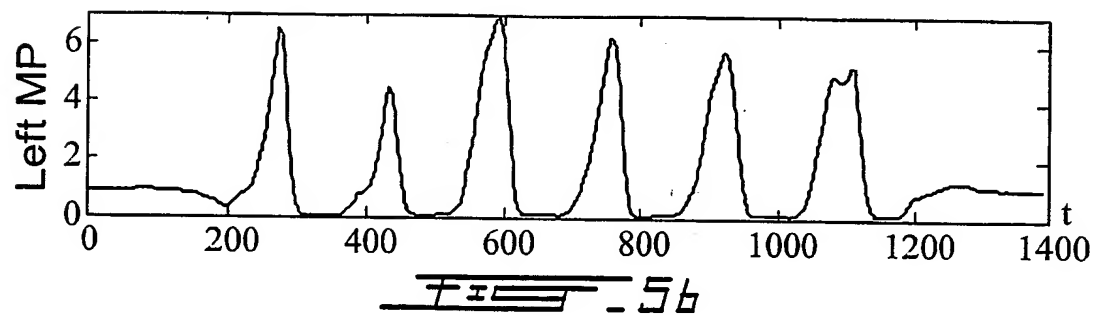
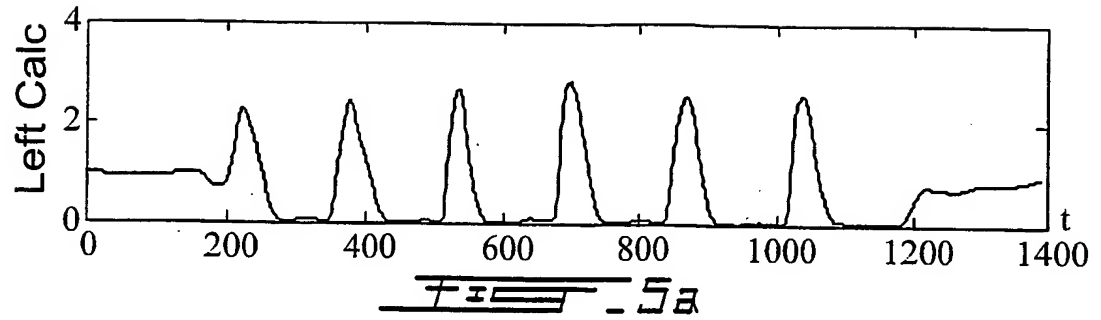
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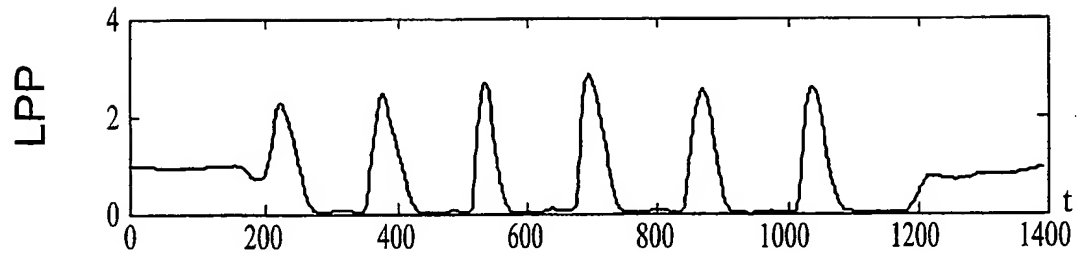
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FIG. 3FIG. 4

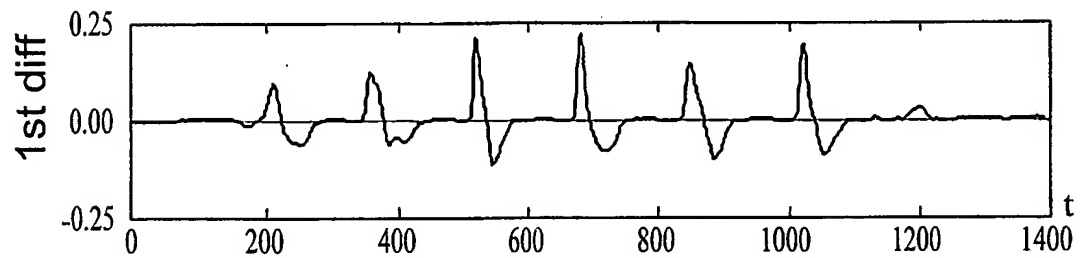
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Reference waveform for LPP, showing a series of horizontal bars representing the peaks in the signal.



Reference waveform for the first derivative, showing sharp vertical spikes corresponding to the peaks in the signal.

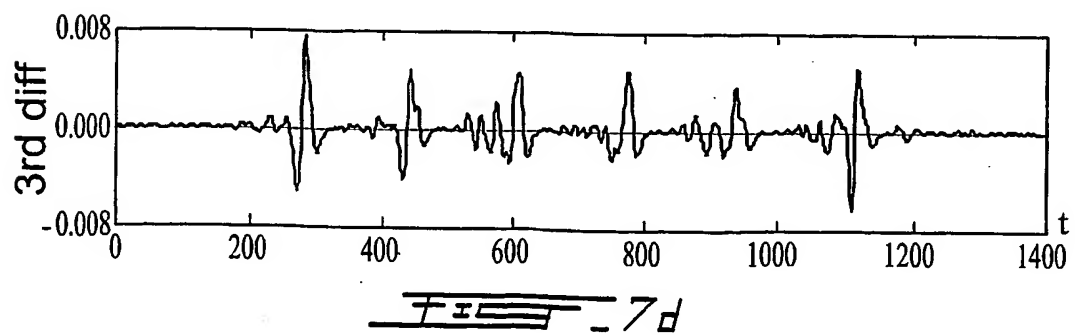
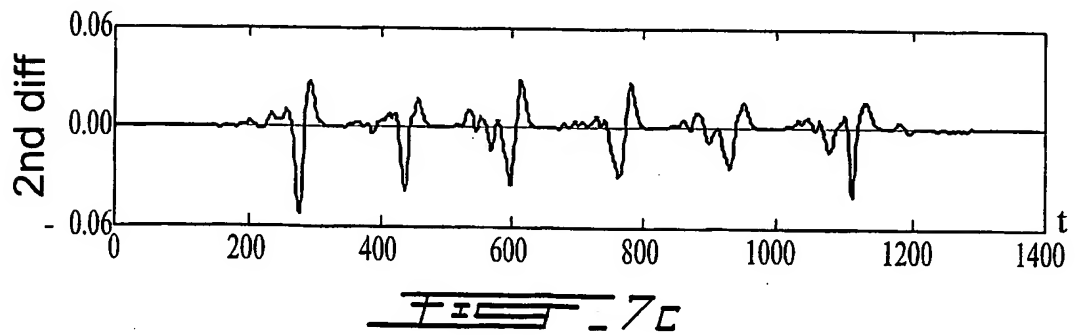
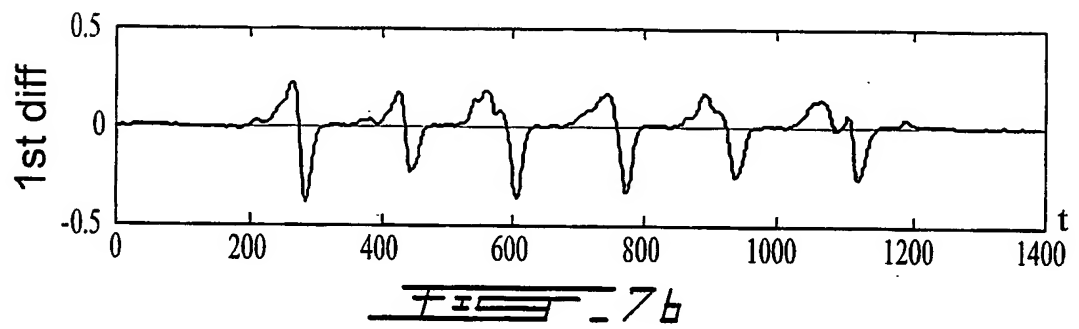
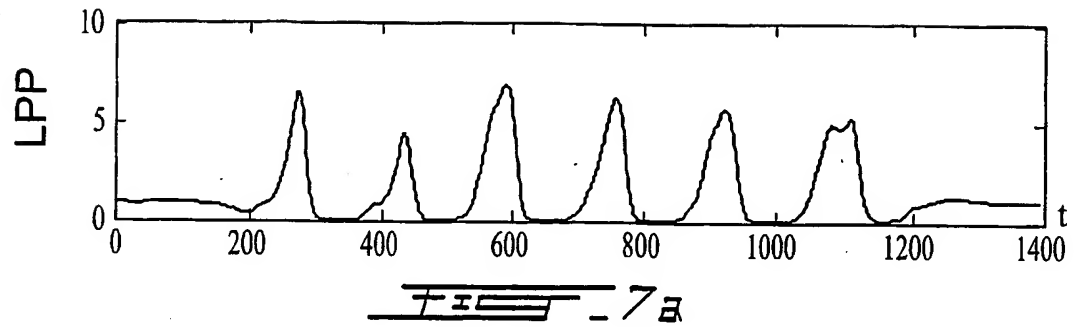


Reference waveform for the second derivative, showing sharp vertical spikes corresponding to the peaks in the signal.

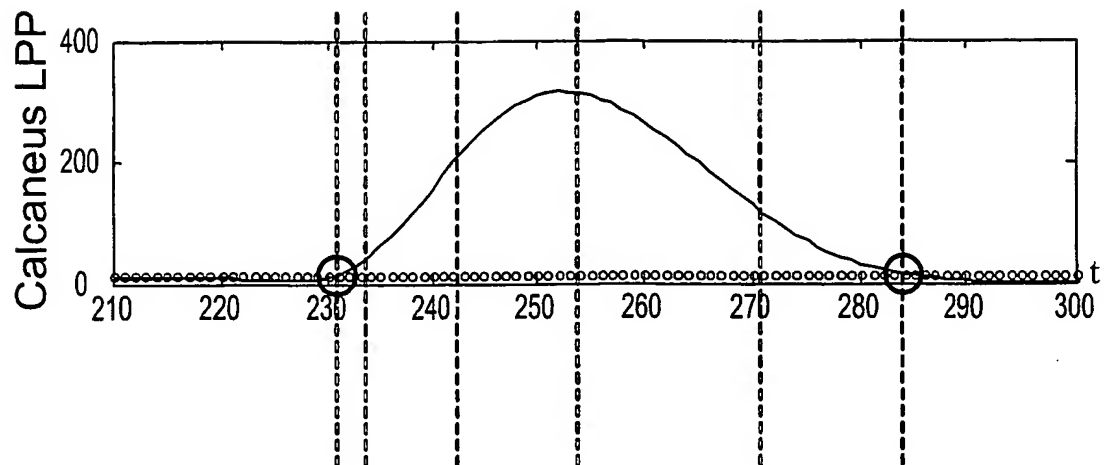
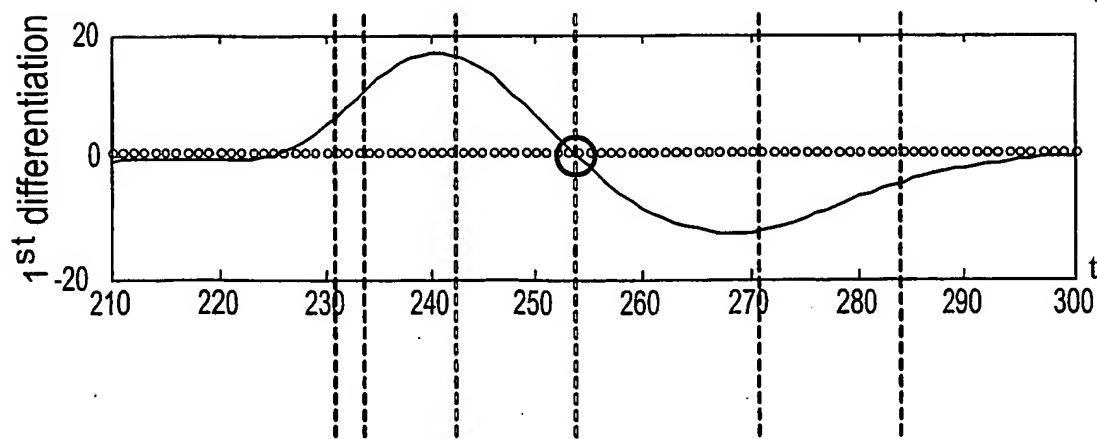


Reference waveform for the third derivative, showing sharp vertical spikes corresponding to the peaks in the signal.

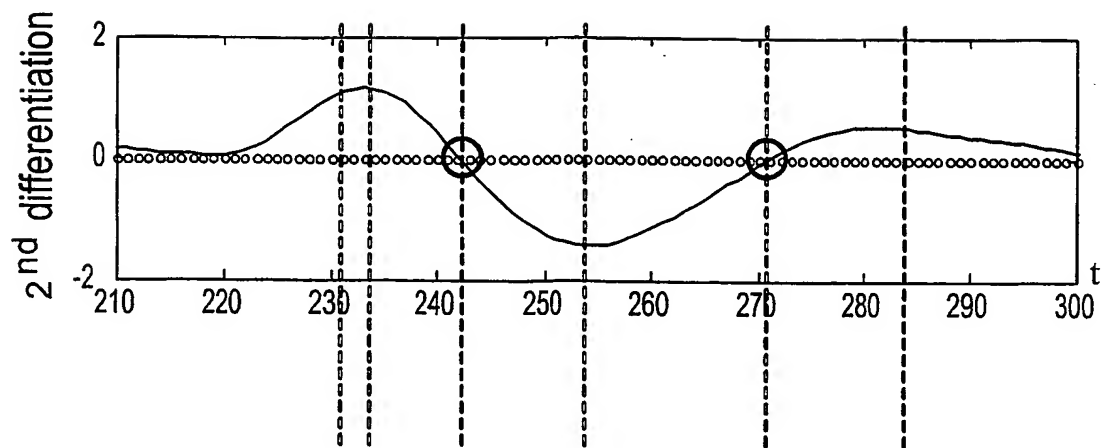
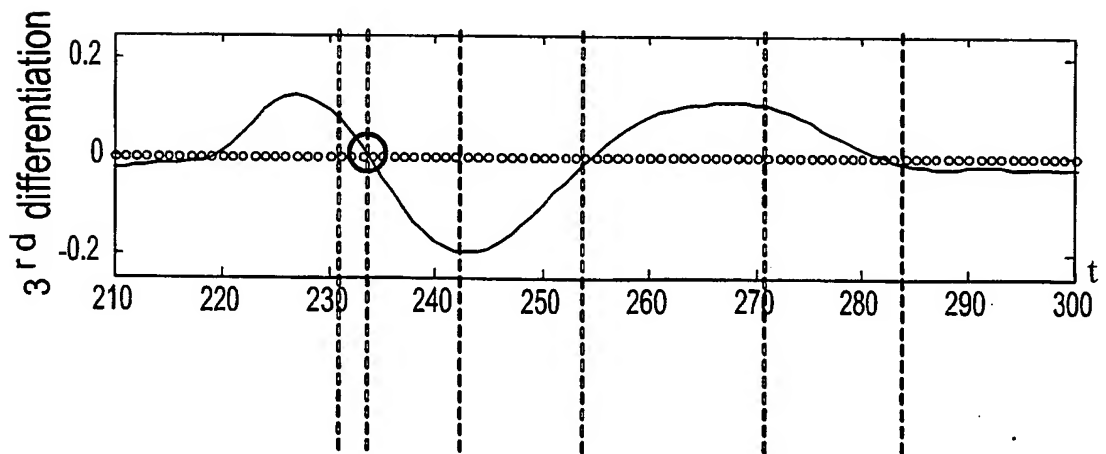
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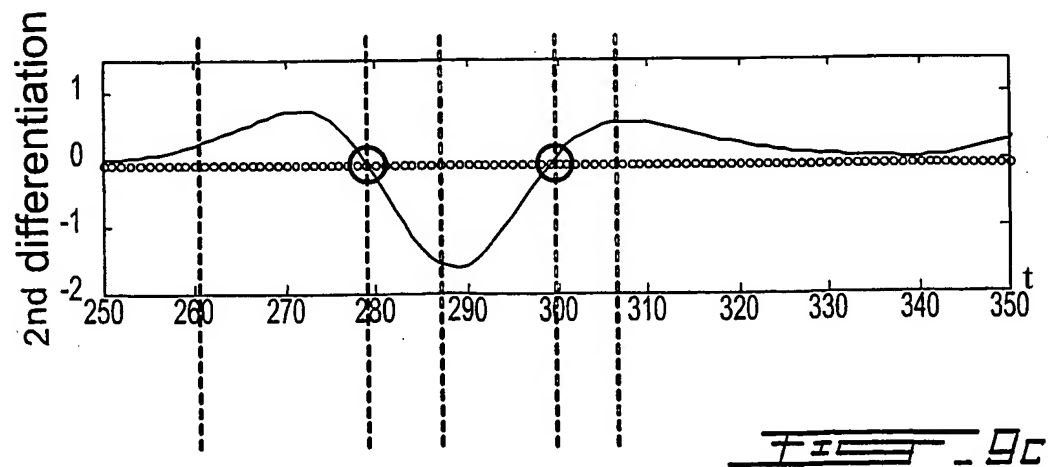
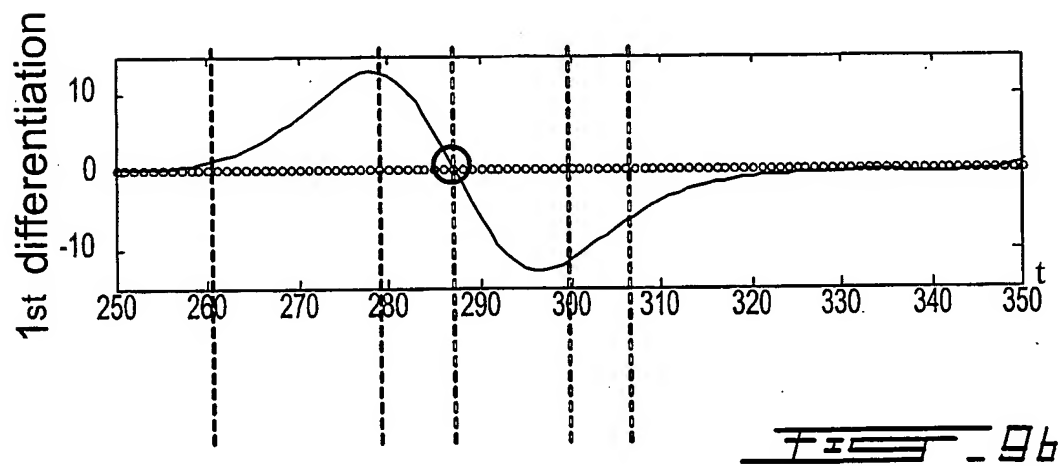
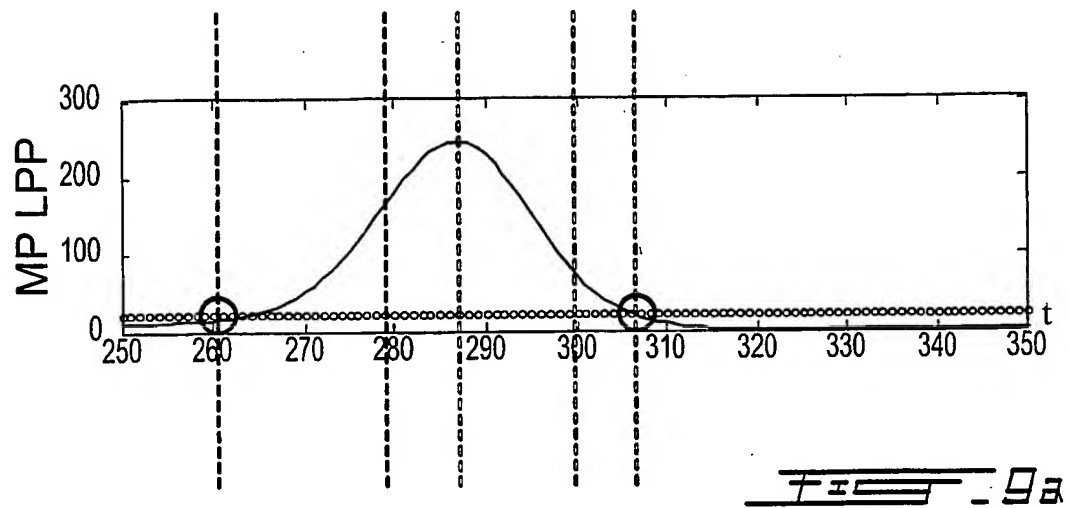
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FIG. 2aFIG. 2b

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FIG. 8CFIG. 8D

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(74) Agents: **PELLEMANS, Nicolas et al.**: McCarthy Tétrault
LLP, Le Windsor, 1170 Peel Street, Montréal, Québec H3B
4S8 (CA).

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(71) Applicant: **VICTHOM HUMAN BIONICS INC.**
[CA/CA]: 4780, rue Saint-Félix, Bureau 105, Saint-Au-
gustin-de-Desmaures, Québec G3A 2J9 (CA).

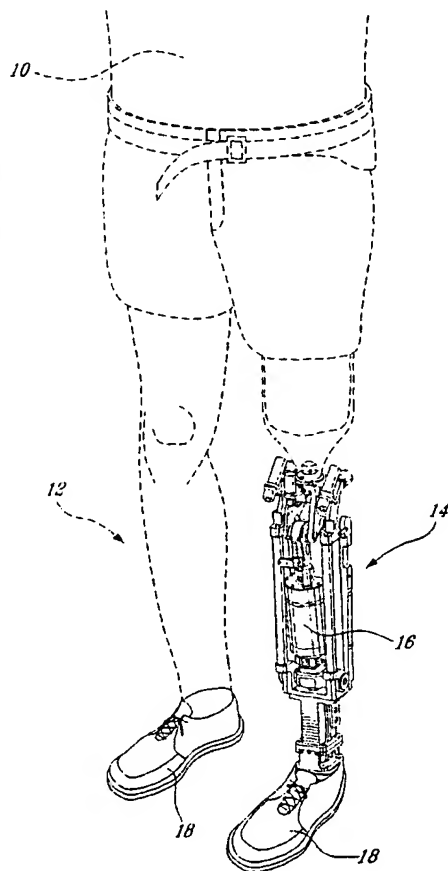
(72) Inventor: **BÉDARD, Stéphane**; 256, rue du Tonnelier,
Saint-Augustin-de-Desmaures, Québec G3A 2K5 (CA).

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[Continued on next page]

(54) Title: POSITIONING OF LOWER EXTREMITIES ARTIFICIAL PROPRIOCEPTORS



(57) Abstract: The method is used for controlling an actuating mechanism (16) of a prosthesis (14) provided on one side of the lower body of an individual (10), the individual (10) having a healthy leg (12) on the other side. Accordingly, the method comprises providing a plurality of artificial proprioceptors (20), at least one of the artificial proprioceptors (20) being on the side of the healthy leg (12), and at least one of the artificial proprioceptors (20) being on provided with the prosthesis (14), generating data signals in real time at the artificial proprioceptors (20), and generating control signals in real time for controlling the actuating mechanism (16) in response to the data signals.

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C. DOCUMENTS CONSIDERED TO BE RELEVANT

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A	WO 96 41599 A (BOCK ORTHOPAED IND ;PERRE GEORGES V D (BE); PEERAER LOUIS (BE); VA) 27 December 1996 (1996-12-27) claim 10	1-72
A	WO 00 38599 A (BIEDERMANN LUTZ ;BIEDERMANN MOTECHE GMBH (DE); MATTHIS WILFRIED (DE) 6 July 2000 (2000-07-06) abstract	1-72
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NL - 2280 HV Rijswijk
Tel. (+31-70) 340-2040, Tx. 31 651 epo nl,
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INTERNATIONAL SEARCH REPORT

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